

One Room School House

DAY Camp Application

May 9th-June 3rd, 2016

- HOURS: 7:30 a.m. until 6:00 p.m. Breakfast, Lunch and a snack will be served. **NO CAMP MEMORIAL DAY.**
- Fees paid one week in advance. **Registration application must include one week payment.**
- \$25 activity fee per application. **This fee will waived if you pay for the first week of camp before April 4th, 2016.**
- **Enrollment ends Monday April 25th, 2016. We will not be able to accept summer camp enrollment after this date.**
- You may pay by cash, check or money order. **Check Return Fee is \$35.00.** You will have to pay cash thereafter.
- Students who do not follow all school rules will be removed from the program.
- There are no refunds. Students removed from the program for behavior will receive a prorated return of fees.

Fee Schedule -Per Week

Full time (pick up by 6:00 p.m.)

Full Lunch-\$90/\$60 per sibling
 Reduced Lunch-\$70/\$50 per sib.
 Free Lunch -\$50/\$30 per sibling
 ORSH VPK (2015-16)-\$90

Part time (Pick up by 2:45 p.m.)*

Full Lunch-\$70/\$45 per sibling
 Reduced Lunch -\$55/\$30 per sib.
 Free Lunch-\$40/\$25 per sibling
 ORSH VPK (2015-16)-\$70

Half Day – pick up by noon, OR - drop off after noon.

Full Lunch-\$45/\$25 per sibling
 Reduced Lunch\$35/\$20 per sibling
 Free Lunch-\$25/\$15 per sibling
 ORSH VPK (2015-16) \$45

***If a student overstays their registered camp day, they will immediately be moved into the next tier and all applicable fees will apply.**

My child will be attending the following day camp weeks (check week and circle full, part or half day attendance):

Week 1 -May 9th- 13th FT PT Half Day
 Week 2- May 16th - 20th FT PT Half Day
 Week 3 -May 23rd-27th FT PT Half Day
 Week 4 - May 31st-June 3rd FT PT Half Day

ONLY STUDENTS WHO ARE PREPAID AND ENROLLED IN DAY CAMP ARE ALLOWED TO BE ON THE ONE ROOM CAMPUS DURING DAY CAMP WEEKS.

DAY Camp is over at 6:00 PM. A late fee of \$15.00 will be charged and due immediately between 6:01 and 6:10. An additional \$1.00 per minute will be charged thereafter. If we have not heard from you by 6:30 PM, the police will be contacted and your child will be removed from the program. Emergencies do arise and traffic can be a problem sometimes, please call ahead and let us know.

I agree to the terms stated in this application. I wish for my child to be enrolled in the summer camp programs under the terms and conditions stated herein. My signature below and payment of fees constitute my acceptance of the program terms.

_____ Parent Signature

_____ Date

Student Name _____ Grade _____

Sibling 1 _____ Grade _____ Sibling 2 _____ Grade _____

Applications only accepted with minimum 1 week fee paid.

Anyone listed as a contact must be prepared to show a photo I.D., even if we are familiar with that person.

Parent/Guardian Information

Mother's Name _____ Cell Phone # _____

Home Phone # _____ Work # _____

Father's Name _____ Cell Phone # _____

Home Phone # _____ Cell Phone # _____

Emergency Contacts and Pick up Information

Name _____ Relationship _____

Cell Phone # _____ Home Phone # _____

Name _____ Relationship _____

Cell Phone # _____ Home Phone # _____

Name _____ Relationship _____

Cell Phone # _____ Home Phone # _____

Name _____ Relationship _____

Cell Phone # _____ Home Phone # _____

Name _____ Relationship _____

Cell Phone # _____ Home Phone # _____

Please note that even if medical conditions, allergies, etc. are on record in either school building, the After School Dept. would like that information noted below.

Allergies: _____

Medical Conditions: _____

Additional Comments: _____

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